

City of Trussville, Alabama  
Business License  
**IMMIGRATION COMPLIANCE FORM**  
Revenue Department  
205-655-7478 email: [BL@Trussville.org](mailto:BL@Trussville.org)

To be included with application for business license or business license renewal.

BUSINESS NAME \_\_\_\_\_

FORM OF BUSINESS (Check one)

Sole Proprietorship

Partnership

Corporation

Professional Association

LLC

Other \_\_\_\_\_

REQUIRED INFORMATION

FEIN or SSN \_\_\_\_\_

Driver's License \_\_\_\_\_ (Attach Copy)

Expiration Date \_\_\_\_\_

Other proof of legal residency or citizenship \_\_\_\_\_ (Attach Copy)

I declare under the penalties of perjury that this application for license/license renewal has been examined by me and to the best of my knowledge and belief is a true, correct, accurate and complete statement. I hereby declare under the penalties of perjury that I am a legal resident or citizen of the United States of America and that I have attached proof of legal residency or citizenship to this application.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date